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TO: Commissioner for Patents
Attn: Examiner Daniel Lastra
Patent Examining Corps
Facsimile Center
Alexandria, VA 22313-1450

FROM: George H. Gates
OUR REF.: 9998
TELEPHONE: (310) 642-4146

Total pages, including cover letter: 25

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Title of Document Transmitted:	TRANSMITTALS AND AMENDMENT UNDER 37 C.F.R. §1.111
Applicant:	Judith A. Bayer et al.
Serial No.:	09/998,750
Filed:	November 30, 2001
Group Art Unit:	3622
Title:	AUTOMATED PROMOTION RESPONSE MODELING IN A CUSTOMER RELATIONSHIP MANAGEMENT SYSTEM
Our Ref. No.:	9998

Please charge all fees to Deposit Account No. 14-0225 of NCR Corporation, the assignee of the present application.

By: 

Name: George H. Gates

Reg. No.: 33,500

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Signature

January 4, 2007

Date

GHG/cf

G&C 30145.426-US-01

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Due Date: January 4, 2007

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Judith A. Bayer et al.	Examiner:	Daniel Lastra
Serial No.:	09/998,750	Group Art Unit:	3622
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CERTIFICATE OF MAILING OR TRANSMISSION UNDER 37 CFR 1.8

I hereby certify that this correspondence is being filed via facsimile transmission to the U.S. Patent and Trademark Office on January 4, 2007.

By: George H. Gates
Name: George H. Gates

MAIL STOP AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

We are transmitting herewith the attached:

- ☒ Transmittal sheet, in duplicate, containing a Certificate of Mailing or Transmission under 37 CFR 1.8.
- ☒ Amendment Under 37 C.F.R. §1.111.

CLAIMS PRESENT

Claims Remaining:	Highest Number Previously Paid For:	Number Extra	Rate	Fee
Total Claims				
21	21	0	x \$50.00	= \$0.00
Independent Claims				
3	3	0	x \$200.00	= \$0.00
MULTIPLE DEPENDENT CLAIM FEE				\$0.00
TOTAL FILING FEE				\$0.00

Please consider this a **PETITION FOR EXTENSION OF TIME** for a sufficient number of months to enter these papers, if appropriate.

Please charge all fees to Deposit Account No. 14-0225 of NCR Corporation (the assignee of the present application). A duplicate of this paper is enclosed.

Customer Number 26890
GATES & COOPER LLP
Howard Hughes Center
6701 Center Drive West, Suite 1050
Los Angeles, CA 90045
(310) 641-8797

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MULTIPLE DEPENDENT CLAIM FEE				\$0.00
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Dear Sir:

In response to the Office Action dated October 4, 2006, please amend the above-identified
application as follows.